

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NEVADA			
Case number (if known)	18-11554		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 341,283.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 341,283.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 17,794.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 359,077.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 3,289,100.00
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 3,289,100.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 0.00
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 82,378.00
		Your total liabilities \$ 3,371,478.00

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 5,293.61
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 5,293.61
5.	Schedule J: Your Expenses (Official Form 106J)	\$ 3,157.00
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 3,157.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554**

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ **5,058.84**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 74,715.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 74,715.00

Fill in this information to identify your case and this filing:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NEVADA			
Case number	18-11554		

Check if this is an amended filing

Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.

Yes. Where is the property?

1.1

6424 Elizabethtown Avenue

Street address, if available, or other description

Las Vegas	NV	89110-0000
City	State	ZIP Code

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$341,283.00

Current value of the portion you own?

\$341,283.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$341,283.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554****3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

No
 Yes

3.1 Make: **FORD**
 Model: **F-150**
 Year: **2003**
 Approximate mileage: **178100**
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$1,636.00 **\$1,636.00**

3.2 Make: **FORD**
 Model: **EXPEDITION**
 Year: **2009**
 Approximate mileage: **97200**
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$7,848.00 **\$7,848.00**

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$9,484.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.....

HOUSEHOLD FURNISHINGS

\$5,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No
 Yes. Describe.....

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554****9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....**CLOTHING****\$1,500.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**WEDDING RINGS, WATCHES, ETC.****\$300.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$6,800.00**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

**WELLS FARGO
CHECKING #3605****\$485.00****17.1. Checking****17.2. Savings****WELLS FARGO
SAVINGS #9966****\$25.00**

Debtor 1 ANTONIO VACA MALDONADO
Debtor 2 LETICIA Maldonado

Case number (if known) 18-11554

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

401(k)**Fidelity 401 K (loan taken out against the
401K paying back monthly at 20 per month)****\$1,000.00****22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them...**Money or property owed to you?****Current value of the
portion you own?
Do not deduct secured
claims or exemptions.**

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554****28. Tax refunds owed to you**

No
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No
 Yes. Give specific information.....

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information..

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,510.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....**54. Add the dollar value of all of your entries from Part 7. Write that number here****\$0.00****Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2		\$341,283.00
56. Part 2: Total vehicles, line 5	\$9,484.00	
57. Part 3: Total personal and household items, line 15	\$6,800.00	
58. Part 4: Total financial assets, line 36	\$1,510.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
62. Total personal property. Add lines 56 through 61...	\$17,794.00	Copy personal property total \$17,794.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$359,077.00

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEVADA</u>			
Case number (if known)	<u>18-11554</u>		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
6424 Elizabethtown Avenue Las Vegas, NV 89110 Clark County Line from <i>Schedule A/B</i> : 1.1	\$341,283.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. §§ 21.090(1)(l) and 115.050
2003 FORD F-150 178100 miles Line from <i>Schedule A/B</i> : 3.1	\$1,636.00	<input checked="" type="checkbox"/> \$1,636.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(f)
2009 FORD EXPEDITION 97200 miles Line from <i>Schedule A/B</i> : 3.2	\$7,848.00	<input checked="" type="checkbox"/> \$7,848.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(f)
HOUSEHOLD FURNISHINGS Line from <i>Schedule A/B</i> : 6.1	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
CLOTHING Line from <i>Schedule A/B</i> : 11.1	\$1,500.00	<input checked="" type="checkbox"/> \$1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
WEDDING RINGS, WATCHES, ETC. Line from <i>Schedule A/B</i> : 12.1	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(a)
Checking: WELLS FARGO CHECKING #3605 Line from <i>Schedule A/B</i> : 17.1	<u>\$485.00</u>	<input checked="" type="checkbox"/> <u>\$485.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)
401(k): Fidelity 401 K (loan taken out against the 401K paying back monthly at 20 per month) Line from <i>Schedule A/B</i> : 21.1	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(r)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NEVADA			
Case number (if known)	18-11554		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--	--	--

2.1	REPUBLIC SILVER STATE DISPOSAL INC Creditor's Name	Describe the property that secures the claim: 6424 Elizabethtown Avenue Las Vegas, NV 89110 Clark County	\$0.00	\$341,283.00	\$0.00
-----	--	--	---------------	---------------------	---------------

**770 E Sahara Ave
Las Vegas, NV 89104**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

2.2	SHELL POINTE MORTGAGE Creditor's Name	Describe the property that secures the claim: 6424 Elizabethtown Avenue Las Vegas, NV 89110 Clark County	\$3,289,100.00	\$341,283.00	\$2,947,817.00
-----	---	--	-----------------------	---------------------	-----------------------

**53 Beattie Place #110
Greenville, SC 29601**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **1st Mortgage**

Debtor 1 **ANTONIO VACA MALDONADO**

Case number (if known)

18-11554

First Name

Middle Name

Last Name

Debtor 2 **LETICIA Maldonado**

First Name

Middle Name

Last Name

Date debt was incurred **2008**

Last 4 digits of account number

4112

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,289,100.00

If this is the last page of your form, add the dollar value totals from all pages.

\$3,289,100.00

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)	18-11554		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	Access Group Inc Nonpriority Creditor's Name 10 North High Street Suite 400 West Chester, PA 19380 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 1215 When was the debt incurred? Opened 12/01/10 Last Active 9/07/11 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.2	Access Group Inc Nonpriority Creditor's Name 10 North High Street Suite 400 West Chester, PA 19380 Number Street City State Zip Code	Last 4 digits of account number 6515	\$0.00
		When was the debt incurred? Opened 11/09/10 Last Active 12/10/11	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify 06 Progressive		
	Educational		
4.3	Credit Collections Services Nonpriority Creditor's Name Attention: Bankruptcy 725 Canton Street Norwood, MA 02062 Number Street City State Zip Code	Last 4 digits of account number 4710	\$327.00
		When was the debt incurred? Opened 12/22/12	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 06 Progressive		
4.4	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 5201	Unknown
		When was the debt incurred? Opened 03/11 Last Active 11/30/16	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify 06 Progressive		
	Educational		

Debtor 1 **ANTONIO VACA MALDONADO**
 Debtor 2 **LETICIA Maldonado**

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4.5	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	Last 4 digits of account number 4201	Unknown
		Opened 11/10 Last Active 11/30/16	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			
4.6	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	Last 4 digits of account number 3201	Unknown
		Opened 11/10 Last Active 11/30/16	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			
4.7	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	Last 4 digits of account number 4201	Unknown
		Opened 06/12 Last Active 11/30/16	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.8	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 6201	Unknown
	When was the debt incurred? Opened 09/11 Last Active 11/30/16		
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		
4.9	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 7201	Unknown
	When was the debt incurred? Opened 09/11 Last Active 11/30/16		
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		
4.10	Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 2201	Unknown
	When was the debt incurred? Opened 05/12 Last Active 11/30/16		
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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**4.1
1**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 3201	Unknown
Who incurred the debt? Check one.	When was the debt incurred? Opened 06/12 Last Active 11/30/16	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.1
2**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 8201	Unknown
Who incurred the debt? Check one.	When was the debt incurred? Opened 11/11 Last Active 11/30/16	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.1
3**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 1201	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 4/14/10 Last Active 11/09/16	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.1 **4**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 2201	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 4/14/10 Last Active 11/09/16	
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Educational

4.1 **5**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 6201	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 8/22/13 Last Active 11/16/16	
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Educational

4.1 **6**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 5201	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 8/22/13 Last Active 11/16/16	
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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**4.1
7**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 1200	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 7/11/03 Last Active 7/13/16	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.1
8**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 1200	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 8/12/09 Last Active 5/18/16	
As of the date you file, the claim is: Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.1
9**

Dept of Ed / Navient Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 2200	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 8/12/09 Last Active 5/18/16	
As of the date you file, the claim is: Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.2 0 Deville Mgmt Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1987 Colleyville, TX 76034 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 11N1 When was the debt incurred? Opened 03/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Santander Co-766	\$6,101.00
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4.2 1 Ecnc Nonpriority Creditor's Name Capital One Retail Svrs/Attn: Bankruptcy Po Box 30258 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 0002 When was the debt incurred? Opened 02/16 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational Navient Education Loan Corp	Unknown
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4.2 2 Ecnc Nonpriority Creditor's Name Capital One Retail Svrs/Attn: Bankruptcy Po Box 30258 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 0001 When was the debt incurred? Opened 02/16 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational Navient Education Loan Corp	Unknown
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Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.2
3

Ecmc Nonpriority Creditor's Name Capital One Retail Svrs/Attn: Bankruptcy Po Box 30258 Salt Lake City, UT 84130 Number Street City State Zip Code	Last 4 digits of account number 0002	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 2/08/16	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 07 Navient Education Loan Corp	

4.2
4

Ecmc Nonpriority Creditor's Name Capital One Retail Svrs/Attn: Bankruptcy Po Box 30258 Salt Lake City, UT 84130 Number Street City State Zip Code	Last 4 digits of account number 0001	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 2/08/16	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 07 Navient Education Loan Corp	

4.2
5

Equiant Financial Svcs Nonpriority Creditor's Name Attn: Bankruptcy Dept 5401 N Pima Rd Scottsdale, AZ 85250 Number Street City State Zip Code	Last 4 digits of account number 1058	\$0.00
Who incurred the debt? Check one.	When was the debt incurred? Opened 09/14 Last Active 4/30/16	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Time Shared Loan	

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4.2

Kane County Court Nonpriority Creditor's Name 540 South Randall Road Saint Charles, IL 60174 Number Street City State Zip Code	Last 4 digits of account number	\$1,191.00
Who incurred the debt? Check one.	When was the debt incurred?	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt 	As of the date you file, the claim is: Check all that apply	
Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input checked="" type="checkbox"/> No		
Judgement		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Clients unaware - but it was on the credit report	

4.2

mchenry law magistrate court Nonpriority Creditor's Name 2200 North Seminary Ave Woodstock, IL 60098 Number Street City State Zip Code	Last 4 digits of account number	M359	\$0.00
Who incurred the debt? Check one.	When was the debt incurred?		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt 	As of the date you file, the claim is: Check all that apply		
Is the claim subject to offset?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Suit filed in 2014 - Clients unaware but it was on the credit report		

4.2

Navient Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number	0812	Unknown
Who incurred the debt? Check one.	When was the debt incurred?		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 	Opened 08/09 Last Active 09/10		
Is the claim subject to offset?	As of the date you file, the claim is: Check all that apply		
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational		
<input type="checkbox"/> Yes			

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

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4.2
9

Navient Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 0812	Unknown
Who incurred the debt? Check one.	When was the debt incurred? Opened 08/09 Last Active 09/10	
As of the date you file, the claim is: Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.3
0

Navient Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 0414	Unknown
Who incurred the debt? Check one.	When was the debt incurred? Opened 04/10 Last Active 09/10	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.3
1

Navient Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 0414	Unknown
Who incurred the debt? Check one.	When was the debt incurred? Opened 04/10 Last Active 09/10	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554

4.3 2	<p>PlusFour, Inc. Nonpriority Creditor's Name Po Box 95846 Las Vegas, NV 89193 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>	<p>Last 4 digits of account number 5423</p> <p>When was the debt incurred? Opened 03/16</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Collection Attorney Southwest Medical Associates</p>	\$44.00
4.3 3	<p>Santander Consumer USA Nonpriority Creditor's Name Santander Consumer USA Po Box 961245 Fort Worth, TX 76161 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>	<p>Last 4 digits of account number 9201</p> <p>When was the debt incurred? Opened 10/06 Last Active 5/12/08</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Automobile</p>	Unknown
4.3 4	<p>Santander Consumer USA Nonpriority Creditor's Name Po Box 961245 Ft Worth, TX 76161 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>	<p>Last 4 digits of account number 1000</p> <p>When was the debt incurred? Opened 09/11 Last Active 3/30/17</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Automobile</p>	Unknown

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

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4.3 **5**

U.S. Department of Education	Last 4 digits of account number	2430	\$9,856.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 6/08/12 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.3 **6**

U.S. Department of Education	Last 4 digits of account number	9519	\$9,310.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 2/19/10 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.3 **7**

U.S. Department of Education	Last 4 digits of account number	2433	\$9,165.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 11/26/10 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

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4.3 **8**

U.S. Department of Education	Last 4 digits of account number	2327	\$8,810.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 9/02/11 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.3 **9**

U.S. Department of Education	Last 4 digits of account number	9355	\$7,309.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/22/13 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.4 **0**

U.S. Department of Education	Last 4 digits of account number	9857	\$5,975.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 6/08/12 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554

**4.4
1**

U.S. Department of Education	Last 4 digits of account number	9867	\$4,890.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 9/02/11 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.4
2**

U.S. Department of Education	Last 4 digits of account number	9527	\$3,970.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 2/19/10 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.4
3**

U.S. Department of Education	Last 4 digits of account number	9864	\$3,896.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 11/26/10 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

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4.4

U.S. Department of Education	Last 4 digits of account number	4501	\$3,436.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 7/11/03 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.5

U.S. Department of Education	Last 4 digits of account number	4601	\$2,377.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 7/11/03 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

4.6

U.S. Department of Education	Last 4 digits of account number	3275	\$2,100.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/22/13 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

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**4.4
7**

U.S. Department of Education	Last 4 digits of account number	2123	\$1,420.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 5/25/12 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.4
8**

U.S. Department of Education	Last 4 digits of account number	9860	\$1,114.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 3/11/11 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

**4.4
9**

U.S. Department of Education	Last 4 digits of account number	9865	\$1,087.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 11/25/11 Last Active 11/20/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

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**4.5
0**

U.S. Department of Education	Last 4 digits of account number	6282	Unknown
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 08/09 Last Active 12/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

**4.5
1**

U.S. Department of Education	Last 4 digits of account number	6276	Unknown
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 08/09 Last Active 12/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

**4.5
2**

US Dept of Education	Last 4 digits of account number	0824	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 7/11/03 Last Active 3/06/12	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

Debtor 1 **ANTONIO VACA MALDONADO**
 Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554

4.5 3	US Dept of Education Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code	Last 4 digits of account number 0724	\$0.00
		When was the debt incurred? Opened 7/11/03 Last Active 3/06/12	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	

Educational

4.5 4	US Dept of Education Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code	Last 4 digits of account number 1121	\$0.00
		When was the debt incurred? Opened 7/11/03 Last Active 7/30/08	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	

Educational**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ 0.00
	6f. Student loans	6f. \$ 74,715.00

Debtor 1 **ANTONIO VACA MALDONADO**
 Debtor 2 **LETICIA Maldonado**

Case number (if known) **18-11554**

claims
from Part 2

6g. **Obligations arising out of a separation agreement or divorce that you did not report as priority claims**
 6h. **Debts to pension or profit-sharing plans, and other similar debts**
 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
 6j. **Total Nonpriority.** Add lines 6f through 6i.

6g.	\$	0.00
6h.	\$	0.00
6i.	\$	7,663.00
6j.	\$	82,378.00

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEVADA</u>			
Case number (if known)	<u>18-11554</u>		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			State what the contract or lease is for
2.1			
Name Number Street City State ZIP Code			
2.2			
Name Number Street City State ZIP Code			
2.3			
Name Number Street City State ZIP Code			
2.4			
Name Number Street City State ZIP Code			
2.5			
Name Number Street City State ZIP Code			

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEVADA</u>			
Case number (if known)	<u>18-11554</u>		

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

 No
 Yes.

In which community state or territory did you live? -NONE- . Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1

Name _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number _____ Street _____ State _____ ZIP Code _____

3.2

Name _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number _____ Street _____ State _____ ZIP Code _____

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO
Debtor 2 (Spouse, if filing)	LETICIA Maldonado
United States Bankruptcy Court for the:	DISTRICT OF NEVADA
Case number (if known)	18-11554

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Truck Driver	Teacher
Employer's name	Soil Tech	CCSD
Employer's address	5375 Cameron Street Las Vegas, NV 89118	2832 E. Flamingo Road Las Vegas, NV 89121

How long employed there? **6 Years** **2 Years**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 2,682.17	\$ 2,376.67
3. Estimate and list monthly overtime pay.	3. +\$ 547.50	+\$ 357.27
4. Calculate gross Income. Add line 2 + line 3.	4. \$ 3,229.67	\$ 2,733.94

Debtor 1 **ANTONIO VACA MALDONADO**
 Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4. \$ 3,229.67	\$ 2,733.94	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 340.00	\$ 220.00	
5b. Mandatory contributions for retirement plans	5b. \$ 110.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00	
5e. Insurance	5e. \$ 0.00	\$ 0.00	
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00	
5g. Union dues	5g. \$ 0.00	\$ 0.00	
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ 0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 450.00	\$ 220.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,779.67	\$ 2,513.94	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00	
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00	
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00	
8e. Social Security	8e. \$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00	
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00	
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ 0.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ 0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,779.67	+ \$ 2,513.94	= \$ 5,293.61
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 5,293.61		
13. Do you expect an increase or decrease within the year after you file this form?	Combined monthly income		
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO
Debtor 2	LETICIA Maldonado
(Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF NEVADA
Case number	18-11554
(If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.

Yes.

Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

14

No

Yes

No

Yes

No

Yes

No

Yes

Son

19

No

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **0.00**

Your expenses

If not included in line 4:

4a. Real estate taxes	4a. \$ 0.00
4b. Property, homeowner's, or renter's insurance	4b. \$ 0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$ 120.00
4d. Homeowner's association or condominium dues	4d. \$ 80.00
5. Additional mortgage payments for your residence, such as home equity loans	5. \$ 0.00

Debtor 1 **ANTONIO VACA MALDONADO**
 Debtor 2 **LETICIA Maldonado**

Case number (if known) **18-11554**

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ <u>450.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>238.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>320.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>

7. Food and housekeeping supplies

8. Childcare and children's education costs	8. \$ <u>0.00</u>
---	-------------------

9. Clothing, laundry, and dry cleaning

10. Personal care products and services	10. \$ <u>80.00</u>
---	---------------------

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>400.00</u>
--	----------------------

13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>50.00</u>
--	---------------------

14. Charitable contributions and religious donations

15. Insurance.	14. \$ <u>0.00</u>
----------------	--------------------

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ <u>104.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>230.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____	16. \$ <u>0.00</u>
----------------	--------------------

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.	\$ <u>0.00</u>
---	----------------

Specify: _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

21. Other: Specify: **Car Maintenance**

21. +\$ <u>125.00</u>

22. Calculate your monthly expenses

22a. Add lines 4 through 21.	\$ <u>3,157.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>3,157.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>3,157.00</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>5,293.61</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>3,157.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>2,136.61</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO	
	First Name	Middle Name
Debtor 2	LETICIA Maldonado	
(Spouse if, filing)	First Name	Middle Name
United States Bankruptcy Court for the:	DISTRICT OF NEVADA	
Case number (if known)	<u>18-11554</u>	

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ ANTONIO VACA MALDONADO

ANTONIO VACA MALDONADO

Signature of Debtor 1

Date April 6, 2018

X /s/ LETICIA Maldonado

LETICIA Maldonado

Signature of Debtor 2

Date April 6, 2018

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO		
	First Name	Middle Name	Last Name
Debtor 2	LETICIA Maldonado		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)	18-11554		

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

	Debtor 1	Debtor 2		
From January 1 of current year until the date you filed for bankruptcy:	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$6,721.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$5,897.00

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554**

	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$37,680.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$25,567.00
For the calendar year before that: (January 1 to December 31, 2016)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$36,094.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$28,094.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
In re Anotonio and Leticia Maldonado 1811554	BankruptcyChapt er13	US BKPT CT NV LAS VEGA	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			Unknown - 0.00

In re Anotonio and Leticia Maldonado 1716752LED	BankruptcyChapt er13	US BKPT CT NV LAS VEGA	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			Dismissed - 0.00

DIANE DENOON vs Unknown Defendant 14LM359	CIVIL NEW FILING	MCHENRY LAW MAGISTRATE COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			- 0.00

DIANNE HILL vs Unknown Defendant	JUDGMENT	KANE COUNTY, ILLINOIS	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			- 1,191.17

Debtor 1 ANTONIO VACA MALDONADO
Debtor 2 LETICIA Maldonado

Case number (if known) 18-11554

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below.

No. Go to line 11.
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
Explain what happened			

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
Explain what happened			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Charity's Name	Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Explain what happened					

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Explain what happened			

Debtor 1 ANTONIO VACA MALDONADO
Debtor 2 LETICIA Maldonado

Case number (if known) 18-11554

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Address Email or website address Person Who Made the Payment, if Not You LJ Law 7465 W. Lake Mead Blvd. Suite 100 Las Vegas, NV 89128 bonnie@ljlawlv.com	Attorney Fees		\$2,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Address			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Address			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?

Debtor 1 ANTONIO VACA MALDONADO
Debtor 2 LETICIA Maldonado

Case number (if known) 18-11554

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	--	-----------------------	-------

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**Case number (if known) **18-11554**

A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation
 No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
--	---	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued tax preparation
Computax 1818 S Eastern Ave Las Vegas, NV 89104	

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ ANTONIO VACA MALDONADO
ANTONIO VACA MALDONADO
 Signature of Debtor 1

Date April 6, 2018

/s/ LETICIA Maldonado
LETICIA Maldonado
 Signature of Debtor 2

Date April 6, 2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known): 18-11554**Official Form 121****Statement About Your Social Security Numbers**

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Tell the Court About Yourself and Your spouse if Your Spouse is Filing With You

	For Debtor 1:	For Debtor 2 (Only if Spouse is Filing):
1. Your name	ANTONIO First name VACA Middle name MALDONADO Last name	LETICIA First name Maldonado Middle name Last name

Part 2: Tell the Court About all of Your Social Security or Federal Individual Taxpayer Identification Numbers

2. All Social Security Numbers you have used	<u>627-22-4080</u>	<u>358-60-4112</u>
	<input type="checkbox"/> You do not have a Social Security Number	<input type="checkbox"/> You do not have a Social Security Number
3. All federal Individual Taxpayer Identification Numbers (ITIN) you have used	<input checked="" type="checkbox"/> You do not have an ITIN.	
	<input checked="" type="checkbox"/> You do not have an ITIN.	

Part 3: Sign Below

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

/s/ ANTONIO VACA MALDONADO
ANTONIO VACA MALDONADO
 Signature of Debtor 1

Date April 6, 2018

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

/s/ LETICIA Maldonado
LETICIA Maldonado
 Signature of Debtor 2

Date April 6, 2018

Fill in this information to identify your case:

Debtor 1	ANTONIO VACA MALDONADO
Debtor 2 (Spouse, if filing)	LETICIA Maldonado
United States Bankruptcy Court for the:	District of Nevada
Case number (if known)	18-11554

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 2,682.17	\$ 2,376.67
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00

Debtor 1
Debtor 2
ANTONIO VACA MALDONADO
LETICIA Maldonado

Case number (if known)

18-11554

7. Interest, dividends, and royalties

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
For your spouse \$ **0.00**

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

..... \$ **0.00** \$ **0.00**
..... \$ **0.00** \$ **0.00**

Total amounts from separate pages, if any. + \$ **0.00** \$ **0.00**

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ **2,682.17** + \$ **2,376.67** = \$ **5,058.84**

Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ **5,058.84**

13. Calculate the marital adjustment. Check one:

You are not married. Fill in 0 below.
 You are married and your spouse is filing with you. Fill in 0 below.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

..... \$
..... \$
+\$
Total \$ **0.00** Copy here=> - **0.00**

14. Your current monthly income. Subtract line 13 from line 12.

\$ **5,058.84**

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> \$ **5,058.84**

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form. \$ **60,706.08**

Debtor 1 **ANTONIO VACA MALDONADO**
Debtor 2 **LETICIA Maldonado**

Case number (if known)

18-11554**16. Calculate the median family income that applies to you. Follow these steps:**16a. Fill in the state in which you live. **NV**16b. Fill in the number of people in your household. **4**

16c. Fill in the median family income for your state and size of household.

\$ **75,783.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)18. **Copy your total average monthly income from line 11.** **\$ 5,058.84**19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

-\$ **0.00**19b. **Subtract line 19a from line 18.**\$ **5,058.84**20. **Calculate your current monthly income for the year.** Follow these steps:20a. Copy line 19b. **\$ 5,058.84**

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ 60,706.08

20c. Copy the median family income for your state and size of household from line 16c.

\$ 75,783.00**21. How do the lines compare?**

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ ANTONIO VACA MALDONADO**ANTONIO VACA MALDONADO**

Signature of Debtor 1

Date **April 6, 2018**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

X /s/ LETICIA Maldonado**LETICIA Maldonado**

Signature of Debtor 2

Date **April 6, 2018**

MM / DD / YYYY

Current Monthly Income Details for the Debtor**Debtor Income Details:**

Income for the Period 09/01/2017 to 02/28/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

6 Months Ago:	<u>09/2017</u>	<u>\$2,720.00</u>
5 Months Ago:	<u>10/2017</u>	<u>\$3,281.00</u>
4 Months Ago:	<u>11/2017</u>	<u>\$2,720.00</u>
3 Months Ago:	<u>12/2017</u>	<u>\$3,298.00</u>
2 Months Ago:	<u>01/2018</u>	<u>\$2,346.00</u>
Last Month:	<u>02/2018</u>	<u>\$1,728.00</u>
Average per month:		<u>\$2,682.17</u>

Current Monthly Income Details for the Debtor's Spouse**Spouse Income Details:**Income for the Period **09/01/2017 to 02/28/2018**.**Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions**Source of Income: **Employment**

Income by Month:

6 Months Ago:	09/2017	\$3,042.00
5 Months Ago:	10/2017	\$3,042.00
4 Months Ago:	11/2017	\$1,500.00
3 Months Ago:	12/2017	\$3,042.00
2 Months Ago:	01/2018	\$1,817.00
Last Month:	02/2018	\$1,817.00
Average per month:		\$2,376.67

United States Bankruptcy Court
District of Nevada

In re **ANTONIO VACA MALDONADO**
LETICIA Maldonado

Case No. **18-11554**
Chapter **13**

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 4,800.00
Prior to the filing of this statement I have received	\$ 2,000.00
Balance Due	\$ 2,800.00

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 6, 2018

Date

/s/ BONNIE LONARDO

BONNIE LONARDO 8548

Signature of Attorney

LJ Law

7465 W. Lake Mead Blvd. Suite 100

Las Vegas, NV 89128

702-562-8125 Fax: 702-562-8177

bonnie@ljlawlv.com

Name of law firm

**United States Bankruptcy Court
District of Nevada**

In re **ANTONIO VACA MALDONADO**
LETICIA Maldonado

Debtor(s)

Case No. **18-11554**
Chapter **13**

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: April 6, 2018

/s/ ANTONIO VACA MALDONADO

ANTONIO VACA MALDONADO

Signature of Debtor

Date: April 6, 2018

/s/ LETICIA Maldonado

LETICIA Maldonado

Signature of Debtor

ANTONIO VACA MALDONADO
LETICIA Maldonado
6462 Elizabeth Town
Las Vegas, NV 89110

BONNIE LONARDO
LJ Law
7465 W. Lake Mead Blvd. Suite 100
Las Vegas, NV 89128

Access Group Inc
Acct No xxxx1215
10 North High Street
Suite 400
West Chester, PA 19380

Access Group Inc
Acct No xxxx6515
10 North High Street
Suite 400
West Chester, PA 19380

Credit Collections Services
Acct No xxxx4710
Attention: Bankruptcy
725 Canton Street
Norwood, MA 02062

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx5201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx4201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx3201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx4201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx6201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx7201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx2201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx3201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx8201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx1201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx2201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx6201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx5201
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx1200
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx1200
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Dept of Ed / Navient
Acct No xxxxxxxxxxxxxxxx2200
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Deville Mgmt
Acct No xxxxxxxx11N1
Attn: Bankruptcy
Po Box 1987
Colleyville, TX 76034

Ecmc
Acct No xxxxxxxx0002
Capital One Retail Svcs/Attn: Bankruptcy
Po Box 30258
Salt Lake City, UT 84130

Ecmc
Acct No xxxxxxxx0001
Capital One Retail Svcs/Attn: Bankruptcy
Po Box 30258
Salt Lake City, UT 84130

Equant Financial Svcs
Acct No xxxxxxxx1058
Attn: Bankruptcy Dept
5401 N Pima Rd
Scottsdale, AZ 85250

Kane County Court
540 South Randall Road
Saint Charles, IL 60174

mchenry law magistrate court
Acct No xxxx - xxxM359
2200 North Seminary Ave
Woodstock, IL 60098

Navient
Acct No xxxxxxxxxxxxxxxxxxxx0812
Attn: Bankruptcy
Po Box 9500
Wilkes-Barre, PA 18773

Navient
Acct No xxxxxxxxxxxxxxxxxxxx0812
Attn: Bankruptcy
Po Box 9500
Wilkes-Barre, PA 18773

Navient
Acct No xxxxxxxxxxxxxxxxxxxx0414
Attn: Bankruptcy
Po Box 9500
Wilkes-Barre, PA 18773

Navient
Acct No xxxxxxxxxxxxxxxxxxxx0414
Attn: Bankruptcy
Po Box 9500
Wilkes-Barre, PA 18773

PlusFour, Inc.
Acct No xxx5423
Po Box 95846
Las Vegas, NV 89193

REPUBLIC SILVER STATE DISPOSAL INC
770 E Sahara Ave
Las Vegas, NV 89104

Santander Consumer USA
Acct No xxxxxx9201
Santander Consumer USA
Po Box 961245
Fort Worth, TX 76161

Santander Consumer USA
Acct No xxxxxxxxxxxxxxxx1000
Po Box 961245
Ft Worth, TX 76161

SHELL POINTE MORTGAGE
Acct No xxxx.4112
53 Beattie Place #110
Greenville, SC 29601

U.S. Department of Education
Acct No xxxx2430
Ecmc/Bankruptcy
Po Box 16408
Saint Paul, MN 55116

U.S. Department of Education
Acct No xxxx9519
Ecmc/Bankruptcy
Po Box 16408
Saint Paul, MN 55116

U.S. Department of Education
Acct No xxxx2433
Ecmc/Bankruptcy
Po Box 16408
Saint Paul, MN 55116

U.S. Department of Education
Acct No xxxx2327
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BONNIE LONARDO 8548
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8548 NV

UNITED STATES BANKRUPTCY COURT
 District of Nevada

In Re
ANTONIO VACA MALDONADO
LETICIA Maldonado

BANKRUPTCY NO. **18-11554**
 CHAPTER NO. **13**

Debtor(s)

**DECLARATION RE: ELECTRONIC FILING OF PETITION
 SCHEDULES, STATEMENTS AND PLAN (if applicable)**

PART I - DECLARATION OF PETITIONER

I [We] ANTONIO VACA MALDONADO and LETICIA Maldonado, the undersigned debtor(s) hereby declare under penalty of perjury that the information I have given my attorney and the information provided in the electronically filed petition, statements, schedules, amendments and plan (if applicable) as indicated above is true and correct. I consent to my attorney filing my petition, this declaration, statements, schedules and plan (if applicable) as indicated above to the United States Bankruptcy Court. I understand that this DECLARATION RE: ELECTRONIC FILING is to be filed with the Clerk once all schedules have been filed electronically but, in no event, no later than 15 days following the date the petition was electronically filed. I understand that failure to file the signed original of this DECLARATION will cause my case to be dismissed pursuant to 11 U.S.C. § 707(a)(3) without further notice.

- If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7 or 13. I am aware that I may proceed under chapter 7, 11, 12, or 13 of 11 United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7 or 13. I request relief in accordance with the chapter specified in this petition.
- [If petitioner is a corporation or partnership] I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in this petition.

Dated: April 6, 2018

Signed: /s/ ANTONIO VACA MALDONADO
ANTONIO VACA MALDONADO
 (Applicant)

/s/ LETICIA Maldonado
LETICIA Maldonado
 (Joint Applicant)

PART II - DECLARATION OF ATTORNEY

I, the attorney for the petitioner named in the foregoing petition, declare that, I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Dated: April 6, 2018

Signed: /s/ BONNIE LONARDO
BONNIE LONARDO 8548
 Attorney for Debtor(s)